



APPLICATION FOR DRIVING SCHOOL OWNER LICENSE

APPLICANT—CHECK ONE BOX ONLY

- ☐ Original—\$151 plus \$42 for each Fingerprint Card
☐ Duplicate License—\$15
☐ Change of Name—\$70
☐ Change of Address—\$70 (Complete Section “A” Below)
☐ Adding Branch Location—\$70
☐ Change Branch Address—\$70 (Complete Section “B” Below)

FOR DEPT. USE ONLY	
SPECIAL NO. ASSIGNED	
ACR NO.	
DATE PERMIT ISSUED	DATE PERMIT EXPIRES
APPLICATION FEE—PLUS FINGERPRINT CARD FEE	
OTHER FEE	TOTAL FEE
RECEIPT NO.	

FULL NAME OF INDIVIDUAL, PARTNERS, CORPORATION, LIMITED LIABILITY COMPANY

TELEPHONE

()

DBA

ADDRESS (NUMBER AND STREET)

CITY

ZIP CODE

COUNTY

MAIL TO ADDRESS (P. O. BOX NO.)

CITY

ZIP CODE

REASON FOR MAIL TO (REQUIRE POSTAL CERTIFICATION FORM)

OFFICE HOURS

OPERATOR NAME

OPERATOR LICENSE NO.

COMPLETE FOR CHANGE

SECTION “A”

MAIN (FORMER NAME)

FORMER ADDRESS

SECTION “B”

BRANCH (FORMER NAME)

FORMER ADDRESS

If property is LEASED or RENTED, complete the following.

	PROPERTY OWNER'S FULL NAME	OWNER'S ADDRESS	CITY	TELEPHONE NO.
Main Office				()
Branch No.				

Type of vehicles used: ☐ Auto ☐ Motorcycle ☐ All-Terrain Vehicle

I have checked for compliance with safety regulations and meeting all requirements of state law and local ordinances
I certify under penalty of perjury under the laws of the State of California that the information I have provided is true and correct.

PRINTED NAME OF LICENSEE

TITLE

SIGNATURE OF LICENSEE

DATE

X

